



State Assemblyman
Brian Dahle

INTERNSHIP APPLICATION
Please complete the following information

Name: _____

Email Address: _____

Home Address: _____

Home Phone: _____

College/University: _____

Academic Major: _____

Current grade level: _____

Anticipated year of graduation: _____

GPA: _____

Do you intend to receive academic credit for this internship? _____

Beginning and Ending date of internship: _____

List organizations, club, teams, etc. that you have been involved with:

Please complete the following questions and provide answers on a separate page.

1. Have you worked in an office environment before?
2. Do you handle pressure well?
3. Do you consider yourself well organized?
4. What are your expectations of the internship?
5. Name a public figure you admire. Please explain.
6. Why do you want to intern with Assemblyman Dahle?

Please fax these completed materials and resume to:

Office of Assemblyman Brian Dahle
Attn: Internship Coordinator
FAX (916) 319-2101